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Fill in this information to identify you	r case:	
United States Bankruptcy Court for t	he:	
District of Minneso	ta	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is a amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Robert	
	Write the name that is on your	First name	First name
	government-issued picture identification (for example, your	Hurst Middle name	
	driver's license or passport).	Anderson	Middle name
	Bring your picture identification	Last name	Last name
	to your meeting with the trustee.	Jr Suffix (Sr., Jr, II, III)	
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have		
	used in the last 8 years	First name	First name
	Include your married or maiden	Middle name	Middle name
	names and any assumed, trade names and doing business as	wildlie name	Middle Hame
	names.	Last name	Last name
	Do NOT list the name of any		
	separate legal entity such as a corporation, partnership, or LLC	Business name (if applicable)	Business name (if applicable)
	that is not filing this petition.		
		Business name (if applicable)	Business name (if applicable)
3	Only the last 4 digits of your		
	Social Security number or	xxx - xx - <u>1</u> <u>5</u> <u>8</u> <u>4</u>	xxx - xx
	federal Individual Taxpayer Identification number	OR	OR .
	(ITIN)	9xx - xx	9xx - xx

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Deb	otor 1 Robert	Hurst	Anderson, Jr	Case number (if known)			
	First Name	Middle Name	Last Name				
		About Debtor 1	:	About Debtor 2 (Spo	use Only in a Joint Case):		
4.	Your Employer Identification Number (EIN), if any.						
5.	Where you live			If Debtor 2 lives at a	different address:		
		6680 Saint Cro					
		Number St	reet	Number Street			
		Hastings, MN : City	State ZIP Code	City	State ZIP Code		
		Dakota					
		County		County			
			address is different from the one above, te that the court will send any notices to ng address.	If Debtor 2's mailing a it in here. Note that the at this mailing addres	address is different from yours, fill ne court will send any notices to you s.		
		Number St	reet	Number Street			
		P.O. Box		P.O. Box			
		City	State ZIP Code	City	State ZIP Code		
6.	Why you are choosing this	Check one:		Check one:			
	district to file for bankruptcy	Over the last have lived in district.	st 180 days before filing this petition, I n this district longer than in any other		days before filing this petition, I district longer than in any other		
			ner reason. Explain. S.C. § 1408)	I have another re (See 28 U.S.C. §	ason. Explain. 1408)		

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Anderson, Jr

Debt	tor 1 Robert	Hurst	Anderson, Jr	Case r	number (if known)
	First Name	Middle Na	ame Last Name		•
Pari	t 2: Tell the Court About Yo	ur Bankı	ruptcy Case		
7.	The chapter of the Bankruptcy Code you are choosing to file under	Bankrup Ch Ch		ch, see <i>Notice Required by 11 U.S</i> top of page 1 and check the appro	.C. § 342(b) for Individuals Filing for opriate box.
8.	How you will pay the fee	deta chee a cr I nee to F I rec judg offic choc	ails about how you may pay. Typic ck, or money order. If your attorned edit card or check with a pre-print ed to pay the fee in installments. Pay The Filing Fee in Installments quest that my fee be waived (You ge may, but is not required to, wait is a poverty line that applies to you	cally, if you are paying the fee your ey is submitting your payment on y ted address. If you choose this option, sign an (Official Form 103A). If may request this option only if yo ive your fee, and may do so only if ur family size and you are unable t	clerk's office in your local court for more reself, you may pay with cash, cashier's your behalf, your attorney may pay with d attach the <i>Application for Individuals</i> u are filing for Chapter 7. By law, a your income is less than 150% of the pay the fee in installments). If you are 7 Filing Fee Waived (Official Form
9.	Have you filed for bankruptcy within the last 8 years?	☑ No. □ Yes.	District District District	WhenWhenWhenWhenWhenWhenWhenWhenWhen	Case number Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☑ No. □ Yes.	District	MM / DD / YYYY	
11.	Do you rent your residence?	_	Go to line 12. Has your landlord obtained an No. Go to line 12. Yes. Fill out <i>Initial Stateme</i> as part of this bankruptcy p	ent About an Eviction Judgment Ag	ainst You (Form 101A) and file it

Debtor 1

Robert

Hurst

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Deb	tor 1 Robert	Hurst		Anderson, Jr		_	Case number (if known)	_	
	First Name	Middle Nar	те	Last Name					
Par	t 3: Report About Any Bus	inesses Yo	u Own a	as a Sole Proprieto	or				
12.	Are you a sole proprietor of	☑ No. 0	o to Part	4.					
	any full- or part-time business?	☐ Yes.	Name and	d location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a		Name of business, if any						
	corporation, partnership, or LLC	. Numb	er S	Street					
	If you have more than one sole proprietorship, use a separate sheet and attach it to this								
	petition.	City				State	ZIP Code		
		Chec	Check the appropriate box to describe your business:						
		□ ₁	☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))						
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))						
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))						
			☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))						
		 1	☐ None of the above						
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)?	proceed debtor or of operat	<i>under Sub</i> you are c ons, cash	bchapter V so that it ca choosing to proceed un	<i>n set approp</i> der Subchap	<i>riate dead</i> ter V, you	r you are a small business debtor or a debtor choosing t dlines. If you indicate that you are a small business u must attach your most recent balance sheet, statemer urn or if any of these documents do not exist, follow the		
	For a definition of small busines	s 🗹 No.	I am n	not filing under Chapter	11.				
	debtor, see 11 U.S.C. § 101(51D).	☐ No.		iling under Chapter 11, uptcy Code.	but I am NO	T a small	I business debtor according to the definition in the		
		☐ Yes.					s debtor according to the definition in the under Subchapter V of Chapter 11.		
		☐ Yes.		iling under Chapter 11, and I choose to proce			ing to the definition in § 1182(1) of the Bankruptcy V of Chapter 11.		

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Debt	tor 1	Robert	Hurst	Anderson, Jr			Case number (if known)		
		First Name	Middle Name	Last Name			,		
Par	t 4: Report	if You Own or Ha	ave Any Haz	zardous Property or	Any Proper	ty That Needs I	Immediate Attentio	on	
14.	alleged to p	or have any t poses or is ose a threat of id identifiable	✓ No. ☐ Yes. \	What is the hazard?					
	hazard to pu safety? Or o	id identifiable iblic health or lo you own any t needs immediate	ľ	f immediate attention is r	needed, why i	s it needed?			_
	that must be	do you own pods, or livestock fed, or a building rgent repairs?							_ _ _
			١	Where is the property?	Number	Street			<u> </u>
					City		State	ZIP Code	

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Debt	tor 1 Robert First Name		urst ddle Name	Anderson, Jr Last Name	-	Case number (if known)		
Par	t 5: Explain Your Efforts to	Rec	ceive a Briefin	ng About Credit Counseling				
15.	15. Tell the court whether you have received a briefing about credit counseling.		out Debtor 1:		Abo	out Debtor 2 (Spouse Only in a Joint Case):		
	The law requires that you	You	ı must check one:		You	ı must check one:		
counselir bankrupt check on	receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following	₫	I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.			I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.		
	choices. If you cannot do so, you are not eligible to file.			the certificate and the payment plan, if any ed with the agency.	y,	Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.		
can dismiss your c lose whatever filing paid, and your cred	If you file anyway, the court can dismiss your case, you will lose whatever filing fee you		agency within the	ing from an approved credit counseling e 180 days before I filed this bankruptcy not have a certificate of completion.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.		
	paid, and your creditors can begin collection activities			fter you file this bankruptcy petition, you of the certificate and payment plan, if any	/.	Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.		
	again.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.			I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.		
			attach a separate obtain the briefing	ay temporary waiver of the requirement, e sheet explaining what efforts you made t g, why you were unable to obtain it before ruptcy, and what exigent circumstances le this case.		To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.		
			Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.			Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.		
			If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.			If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.		
				f the 30-day deadline is granted only for ited to a maximum of 15 days.		Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.		
			I am not required counseling becar	I to receive a briefing about credit use of:		I am not required to receive a briefing about credit counseling because of:		
			☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		
			☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		
			Active duty.	I am currently on active military duty in a military combat zone.		Active duty. I am currently on active military duty in a military combat zone.		
				u are not required to receive a briefing nseling, you must file a motion for waiver or with the court.	of	If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.		

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Anderson, Jr

Debt	tor 1	Robert	Hurst	Anderson, Jr		Case no	umber	(if known)
		First Name	Middle N	lame Last Name				
Par	t 6: Answe	er These Questic	ns for R	eporting Purposes				
16.	What kind on the have?	of debts do you	16a.			er debts? Consumer debts are de for a personal, family, or househo		
			16b.			s debts? Business debts are debt ough the operation of the busines		
			16c.	State the type of debts you owe	∍ tha	at are not consumer debts or busi	ness c	lebts.
17.	-	ng under Chapter 7	√	No. I am not filling under Chap Yes. I am filling under Chapter		7. Go to line 18. Do you estimate that after any exe	mpt p	roperty is excluded and
exempt property is excluded and administrative expenses are paid that fur paid that funds will be available for distribution to unsecured creditors?					paid that funds will be available to	distri	oute to unsecured creditors?	
18.		creditors do you at you owe?	S	1-49		25,001-50,000 50,000)-100,(000
19.	How much assets to be	do you estimate yo e worth?	our 🔲	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	liabilities to		our 🔲	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Par	t 7: Sign B	elow						
Foi	r you	If I hav States If no a	re chosen Code. I ui ttorney rep	to file under Chapter 7, I am awa nderstand the relief available und presents me and I did not pay or	are der agr	each chapter, and I choose to pro ee to pay someone who is not an	ler Cha	apter 7, 11,12, or 13 of title 11, United
		have o	btained ar	nd read the notice required by 11	ı U.	S.C. § 342(b).		
		I unde bankru	rstand ma	king a false statement, concealin	ng p	e 11, United States Code, specified property, or obtaining money or pro or imprisonment for up to 20 years	perty	·
		and 35	s/ Rober	t Hurst Anderson, Jr rst Anderson, Jr, Debtor 1				
			Executed	on <u>01/04/2024</u> MM/ DD/ YYYY				

Debtor 1

Robert

Hurst

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Debtor 1		Hurst	Anderson, Jr	Case number (if known)
	First Name	Middle Name	Last Name	
represented	orney, if you are I by one ot represented by an u do not need to file this	proceed under Ch each chapter for v 11 U.S.C. § 342(b	apter 7, 11, 12, or 13 of the vhich the person is eligible and, in a case in which	his petition, declare that I have informed the debtor(s) about eligibility to itle 11, United States Code, and have explained the relief available under e. I also certify that I have delivered to the debtor(s) the notice required by § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		X s/ Andrew V	Valkar	Date <u>01/04/2024</u>
			Attorney for Debtor	MM / DD / YYYY
		Andrew Wal Printed name Walker & Wa Firm name 4356 Nicolle Number	alker Law Offices, PLLC	
		<u>Minneapolis</u>		MN <u>55409</u>
		City		State ZIP Code
		Contact phon	e <u>(612) 824-4357</u>	Email address andrew@bankruptcytruth.com
		0392525		MN
		Bar number		State

		D	ocument Page 9 of 6	1	
Fill in this inform	nation to identify y	our case and this filing	g:		
Debtor 1	Robert	Hurst	Anderson, Jr		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for t	he: District of Minne	<u>esota</u>		
Case number					Check if this is an
					amended filing
Official For	m 106A/R				

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Describe Each Residence	e, Building, Land, or Other Real Estate	You Own or Have an	Interest In	
1.	Do y	ou own or have any legal or equitable	e interest in any residence, building, land, or simil	ar property?		
		No. Go to Part 2.				
	√ Y	es. Where is the property?				
	1.1 Lot 4, Block 3, Wilderness Run 5th Addition, Dakota County,		What is the property? Check all that apply. ☑ Single-family home □ Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
		Minnesota Street address, if available, or other description	 ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land 	Current value of the entire property?	Current value of the portion you own?	
		6680 Saint Croix Trl S	☐ Investment property	\$1,369,000.00	\$1,369,000.00	
		Hastings, MN 55033-9125	☐ Timeshare ☐ Other	Describe the nature of yo (such as fee simple, tena	•	
		City State ZIP Code	Who has an interest in the property? Check one.	a life estate), if known.		
		Dakota	☑ Debtor 1 only	Fee Simple		
	County		 Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another 	☐ Check if this is community property (see instructions)		
			Other information you wish to add about this ite property identification number:			
			Source of Value: RedFin			
2. Pa		have attached for Part 1. Write that n	wn for all of your entries from Part 1, including any umber here		\$1,369,000.00	
		, , , , , , , , , , , , , , , , , , ,	sterest in any vehicles, whether they are registered ehicle, also report it on Schedule G: Executory Contra	•	S	
3.	Ca	rs, vans, trucks, tractors, sport utility	vehicles, motorcycles			
		No				
		Yes				

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	3.1	Make: M	ercedes-Benz	Who has an interest in the property? Check one.	Do not deduct secured cl	aims or exemptions. Put
		Model:		☑ Debtor 1 only		ed claims on Schedule D:
			2024	☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only	Creditors Who Have Clair	
		Year:	<u>2021</u> 25000	At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		Approximate mileage:	23000	☐ Check if this is community property (see	\$69,000.00	\$69,000.00
		Other information:		instructions)		
4.	Wate	rcraft, aircraft, motor	homes, ATVs a	and other recreational vehicles, other vehicles, and	accessories	
	Exam	nples: Boats, trailers, m	otors, personal	watercraft, fishing vessels, snowmobiles, motorcycle a	ccessories	
	√ N	0				
	☐ Y	es				
	4.1	Make:		Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cl	aims or exemptions. Put ed claims on <i>Schedule D:</i>
		Model:		Debtor 2 only	Creditors Who Have Clair	
		Year:		Debtor 1 and Debtor 2 only	Current value of the	Current value of the
		Other information:		☐ At least one of the debtors and another	entire property?	portion you own?
				Check if this is community property (see instructions)		
				instructions)		
5.				wn for all of your entries from Part 2, including any umber here		\$69,000.00
	you i	lave attached for Pari	. Z. Write that ii	umber nere		
Pa	art 3:	Describe You	ır Personal a	and Household Items		
Do y	ou ow	n or have any legal or	equitable inter	rest in any of the following items?		Current value of the portion you own?
						Do not deduct secured
						claims or exemptions.
6.		ehold goods and furr	•			
	Exan	nples: Major appliance	s, furniture, liner	ns, china, kitchenware		
	☐ N					
	√ Y	es. Describe	Typical househ	old goods and furnishing, with no one item over \$650.		\$6,000.00
7.	Elect	ronics				
	Exam	,		ideo, stereo, and digital equipment; computers, printers	s, scanners; music	
		•	tronic devices in	ncluding cell phones, cameras, media players, games		
	□ N					
	√ Y	es. Describe	TV - 600			\$950.00
			Cell phone - 35	50		

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Debtor Anderson, Robert Hurst

Case number (if known)

8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	☑ No	
	Yes. Describe	
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	☑ No	
	☐ Yes. Describe	
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	☑ No	
	Yes. Describe	
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No	
	✓ Yes. Describe Normal wearing apparel	\$900.00
	Normal wearing apparer	
12.	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	☑ No	
	☐ Yes. Describe	1
13.	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	☑ No	
	Yes. Describe	
4.4	Any other parameters to a local disease you did not already list including any health side you did not list	
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	☑ No	1
	Yes. Give specific information	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$7,850.00
Pai	rt 4: Describe Your Financial Assets	
	ou own or have any legal or equitable Current value of the portion you own? Do not deduct secured claims or exemptions.	

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	Examples: Money you	ı have in your wallet, in your ho	ome, in a safe deposit box, and on hand when you file your petition	
	☐ No			
			Cash:	\$5.00
	_			
17.	Deposits of money			
			ounts; certificates of deposit; shares in credit unions, brokerage houses, multiple accounts with the same institution, list each.	
	☐ No			
	√ Yes		Institution name:	
		17.1. Checking account:	Wells Fargo Business	\$13,954.00
		17.2. Savings account:	Wells Fargo	\$0.00
18.	Bonds, mutual funds,	, or publicly traded stocks		
	Examples: Bond funds	s, investment accounts with bro	okerage firms, money market accounts	
	√ No			
	☐ Yes	Institution or issuer name:		
	100	motitation of loader name.		
19.			orated and unincorporated businesses, including an interest in an	
19.	LLC, partnership, and		orated and unincorporated businesses, including an interest in an	
19.	LLC, partnership, and		orated and unincorporated businesses, including an interest in an	
19.	LLC, partnership, and			
19.	LLC, partnership, and No ✓ Yes. Give specific		prated and unincorporated businesses, including an interest in an % of ownership:	
19.	LLC, partnership, and ☐ No ☑ Yes. Give specific information about	Name of entity:	% of ownership:	
19.	LLC, partnership, and ☐ No ☑ Yes. Give specific information about	Name of entity: 100% Debtor's Interest in Assets - \$5000	% of ownership:	(\$70,700.00)
19.	LLC, partnership, and ☐ No ☑ Yes. Give specific information about	Name of entity:	% of ownership:	(\$70,700.00)
19.	LLC, partnership, and ☐ No ☑ Yes. Give specific information about	Name of entity: 100% Debtor's Interest in Assets - \$5000 Accounts receivables- \$0	% of ownership:	(\$70,700.00)
19.	LLC, partnership, and No ✓ Yes. Give specific information about them	Name of entity: 100% Debtor's Interest in Assets - \$5000 Accounts receivables- \$0 Liabilities - \$75700	% of ownership:	(\$70,700.00)
	LLC, partnership, and No Yes. Give specific information about them	Name of entity: 100% Debtor's Interest in Assets - \$5000 Accounts receivables- \$0 Liabilities - \$75700 porate bonds and other nego	% of ownership: Top Source Media LLC	(\$70,700.00)
	LLC, partnership, and No Yes. Give specific information about them	Name of entity: 100% Debtor's Interest in Assets - \$5000 Accounts receivables- \$0 Liabilities - \$75700 porate bonds and other nego	% of ownership: Top Source Media LLC 100.00% Itiable and non-negotiable instruments hiers' checks, promissory notes, and money orders.	(\$70,700.00)
	LLC, partnership, and No Yes. Give specific information about them	Name of entity: 100% Debtor's Interest in Assets - \$5000 Accounts receivables- \$0 Liabilities - \$75700 corate bonds and other nego include personal checks, cash nents are those you cannot trans	% of ownership: Top Source Media LLC 100.00% Itiable and non-negotiable instruments hiers' checks, promissory notes, and money orders.	(\$70,700.00)
	LLC, partnership, and No Yes. Give specific information about them	Name of entity: 100% Debtor's Interest in Assets - \$5000 Accounts receivables- \$0 Liabilities - \$75700 porate bonds and other nego	% of ownership: Top Source Media LLC 100.00% Itiable and non-negotiable instruments hiers' checks, promissory notes, and money orders.	(\$70,700.00)
	LLC, partnership, and No Yes. Give specific information about them	Name of entity: 100% Debtor's Interest in Assets - \$5000 Accounts receivables- \$0 Liabilities - \$75700 corate bonds and other nego include personal checks, cash nents are those you cannot trans	% of ownership: Top Source Media LLC 100.00% Itiable and non-negotiable instruments hiers' checks, promissory notes, and money orders.	(\$70,700.00)
	LLC, partnership, and No Yes. Give specific information about them	Name of entity: 100% Debtor's Interest in Assets - \$5000 Accounts receivables- \$0 Liabilities - \$75700 corate bonds and other nego include personal checks, cash nents are those you cannot trans	% of ownership: Top Source Media LLC 100.00% Itiable and non-negotiable instruments hiers' checks, promissory notes, and money orders.	(\$70,700.00)

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Debtor Anderson, Robert Hurst

Case number (if known) _

21.	Retirement or pension	accounts	
	Examples: Interests in	IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pe	nsion or profit-sharing plans
	□ No		
	✓ Yes. List each		
	account separately.	Type of account: Institution name:	
		401(k) or similar plan: 401k	\$0.00
22.	Security deposits and	propayments	
22.		I deposits you have made so that you may continue service or use from	a company
		s with landlords, prepaid rent, public utilities (electric, gas, water), teleco	
	√ No		
	☐ Yes	Institution name or individual:	
	_	Electric:	
		Gas:	
		Heating oil:	
		Security deposit on rental unit:	
		Prepaid rent:	
		Telephone:	
		Water:	
		Rented furniture:	
		Other:	
23.		or a periodic payment of money to you, either for life or for a number of	years)
	☑ No		
	☐ Yes	Issuer name and description:	
24.		on IRA, in an account in a qualified ABLE program, or under a qua	lified state tuition program.
		529A(b), and 529(b)(1).	
	√ No	Institution name and description. Separately file the records of any inte	procts 11 II S C & 521(a):
	1es	institution harne and description. Separately life the records of any line	16515.11 0.3.6. § 521(6).
25.	Trusts, equitable or fu	ture interests in property (other than anything listed in line 1), and	rights or powers exercisable
	√ No		
	Yes. Give specific		
	information about th	em	

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26.	Patents, copyrights, trademarks, trade	secrets, and other intellectual property		
	Examples: Internet domain names, webs	sites, proceeds from royalties and licensing agreements		
	₫ No			
	Yes. Give specific information about them			
27.		al intangibles censes, cooperative association holdings, liquor licenses, p	rofessional licenses	
	✓ No			1
	Yes. Give specific information about them			
Mone	ey or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	No✓ Yes. Give specific information about them, including whether you	2022 Federal Tax Refund Owed To Debtor-As of the	Federal:	\$0.00
	already filed the returns and the tax years	time of filing, the Debtor has not received a refund. Typically pays in	State:	\$0.00
	the tax years.	2022 Minnesota Income Tax refund owed to debtor-As of the time of filing, the Debtor has not received a refund. Typically pays in	Local:	
29.	Family support Examples: Past due or lump sum alimon settlement	ly, spousal support, child support, maintenance, divorce set	ttlement, property	
	☑ No			
	Yes. Give specific information		Alimony:	
			Maintenance:	
			Support:	
			Divorce settlement:	
			Property settlement:	
30.	Other amounts someone owes you			
	Examples: Unpaid wages, disability insu	rance payments, disability benefits, sick pay, vacation pay, aid loans you made to someone else	workers' compensation,	
	✓ No	and realize you made to composite one		
	Yes. Give specific information			

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31.	Interests in insurance policies Examples: Health, disability, or life insurance	nce; health savings account (HSA); credit, l	homeowner's, or renter's insurance	
	✓ No ☐ Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you If you are the beneficiary of a living trust, e property because someone has died.		y, or are currently entitled to receive	
	✓ No ☐ Yes. Give specific information] ———
33.	Claims against third parties, whether or Examples: Accidents, employment disput ✓ No	•	demand for payment	
	Yes. Describe each claim] ——
34.	Other contingent and unliquidated claims	ns of every nature, including countercla	aims of the debtor and rights to set of	f
	✓ No ☐ Yes. Describe each claim]
35.	Any financial assets you did not already No	/ list		-
	Yes. Give specific information] ———
36.	Add the dollar value of all of your entrie for Part 4. Write that number here		. • .	(\$56,741.00)
Pa	rt 5: Describe Any Business-	Related Property You Own or I	Have an Interest In. List any	real estate in Part 1.
37.	Do you own or have any legal or equital No. Go to Part 6.	ole interest in any business-related prop	perty?	
	Yes. Go to line 38.			Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you ✓ No	ou already earned		
	Yes. Describe]

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39.	Office equipment, furnishings, and supplies	
	Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
	✓ No	
	☐ Yes. Describe	
40.	Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
	☑ No	
	Yes. Describe	
41.	Inventory	
	☑ No	
	Yes. Describe	
42.	Interests in partnerships or joint ventures	
	✓ No ☐ Yes. Describe	
	Name of entity: % of ownership:	
		
		
		—
43.	Customer lists, mailing lists, or other compilations	
	☑ No	
	Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	□ No	
	Yes. Describe	
44.	Any business-related property you did not already list	
	☑ No	
	☐ Yes. Give specific information	
45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$0.00	\Box
	for Part 5. Write that number here	コ

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Par	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an If you own or have an interest in farmland, list it in Part 1.	Interest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	☑ No. Go to Part 7.	
	Yes. Go to line 47.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals	
	Examples: Livestock, poultry, farm-raised fish	
	☑ No	
	☐ Yes	
48.	Crops—either growing or harvested	
	☑ No	
	☐ Yes. Give specific	
	information	
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
	☑ No	
	☐ Yes	
50.	Farm and fishing supplies, chemicals, and feed	
	☑ No	
	☐ Yes	
51.	Any farm- and commercial fishing-related property you did not already list	
	☑ No	
	☐ Yes. Give specific	
	information	
	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
Par	T 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	Do you have other property of any kind you did not already list?	
	Examples: Season tickets, country club membership	
	☑ No	
	Yes. Give specific	
	information	
		20.00
54.	Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00

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Pa	rt 8: List the Totals of Each Part of this Fo	rm		
55.	Part 1: Total real estate, line 2		→	\$1,369,000.00
56.	Part 2: Total vehicles, line 5	\$69,000.00		
57.	Part 3: Total personal and household items, line 15	\$7,850.00		
58.	Part 4: Total financial assets, line 36	(\$56,741.00)		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+\$0.00		
62.	Total personal property. Add lines 56 through 61	\$20,109.00	Copy personal property total	+ \$20,109.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62.			\$1,389,109.00

	Case 24-30023	DUCT P	Document		ge 19 of 61	J4/24 17.JO.4	+1 DC	SSC IVIAIII
Fill in this inform	ation to identify your case	e:						
Debtor 1	Robert First Name	Hurst Middle Name	Anderson, Jr Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name					
United States B	ankruptcy Court for the:		District of Minne	esota				
Case number (if known)								Check if this is an amended filing
Official Fo	rm 106C							
Schedule	e C: The Pro	perty Yo	ou Claim a	as I	Exempt			04/22
property you liste	ed on Schedule A/B: Pro	perty (Official Fo	rm 106A/B) as your	sour	ce, list the prope	rty that you claim a	as exempt	orrect information. Using the . If more space is needed, fill our name and case number (if
Part 1: Identi Which set of You are	laim an exemption of 100 nined to exceed that amount of the Property You of exemptions are you claiming state and federal claiming federal exemptions.	Claim as Exen aiming? Check o	npt ne only, even if your exemptions. 11 U.S	r spou	the applicable st	tatutory amount.	ional amo	unt and the value of the
	perty you list on <i>Schedu</i>		. , , ,	l in the	e information bel	ow.		
	n of the property and line at lists this property	port i Copy	ent value of the ion you own y the value from edule A/B		ount of the exem	ption you claim or each exemption.	·	c laws that allow exemption
Dakota County,	Vilderness Run 5th Additi	·	\$1,369,000.00		\$398,5 100% of fair mark to any applicable	ket value, up	Minn. St	tat. §§ 510.01, 510.02
Brief description:				A	AF 22		Minn C	tot & EEO 27/42\/a\
2021 Mercedes	Benz		\$69,000.00		\$5,00 100% of fair mark		iviinn. St	tat. § 550.37(12)(a)
Line from Schedule A/B:	3.1				to any applicable			

√ No Yes

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

☑ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Debtor 1 Robert Anderson, Jr Hurst Case number (if known) -First Name Middle Name Last Name Part 2: Additional Page Brief description of the property and line on Amount of the exemption you claim Specific laws that allow exemption Current value of the Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief description: $\sqrt{}$ \$6,000.00 Minn. Stat. § 550.37(4)(b) \$6,000.00 Typical household goods and furnishing, with no 100% of fair market value, up one item over \$650. to any applicable statutory limit Line from Schedule A/B: Brief description: $\mathbf{\Lambda}$ \$950.00 Minn. Stat. § 550.37(4)(b) \$950.00 TV - 600 Cell phone - 350 ☐ 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: Brief description: $\sqrt{}$ \$900.00 Minn. Stat. § 550.37(4)(a) \$900.00 Normal wearing apparel ☐ 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 11 Brief description: $\sqrt{}$ Minn. Stat. § 550.37(24) \$0.00 \$0.00 401k ☐ 100% of fair market value, up Line from to any applicable statutory limit Schedule A/B: 21 $\sqrt{}$ \$0.00 11 U.S.C. § 522(b)(3)(C) 100% of fair market value, up to any applicable statutory limit

			Document	Page 21 of 6	1			
Fill in this inform	nation to identify yo	our case:						
Debtor 1	Robert	Hurst	Anderson, Jr					
200101	First Name	Middle Name	Last Name		-			
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name		_			
United States E	Bankruptcy Court f	or the: District of	Minnesota					
Case number (ïf							
known)	"						Check if t	
							amended	l filing
Official For	m 106D							
Cabadu	la Di Cra	aditara M	lha Hayra C	laima Cas	vurad by	, Dranart	+	
<u>schedu</u>	ie D: Cre	eartors w	ho Have C	iaims sec	tured by	y Propert	. <u>y</u>	12/15
name and case in the case in t	number (if known ditors have claims). s secured by your pomit this form to the	lit out, number the enterproperty? court with your other solutions.				one page	, y = a
Part 1:	List All Secured	d Claims						
2. List all sec	cured claims. If a	creditor has more th	an one secured claim, li	st the creditor	Column A	Column B		Column C
	Part 2. As much a		or has a particular claim laims in alphabetical ord		Do not deduct the value of collatera	that support		Unsecured portion If any
2.1 MERCED	ES-BENZ FINANO	CIAI Desc	ribe the property that	secures the claim:	\$36,854	1.00 \$69	,000.00	\$0.00
SERVICE	-	,,,,,,, Desc	mbe the property that	Secures the dam.	Ψ00,00	Ψ00	,000.00	Ψ0.00
Creditor's I	Name	2021	1 Mercedes-Benz					
PO BOX			f the determentile the	alaim ia. Chaalaall tha				
Number	Street	_	f the date you file, the	ciaim is: Check all tha	ат арріу.			
-			Contingent Inliquidated					
	E, TX 76262-0685	<u>'</u>	Disputed					
City	State	ZIP Code	•					
	s the debt? Check	_	re of lien. Check all tha	,				
☑ Debtoi	•		in agreement you made		secured car loan)		
Debtoi	•		statutory lien (such as tax					
Debtor	r 1 and Debtor 2 or	nly 🛄 J	udgment lien from a law	suit				
At least another	st one of the debto er		Other (including a right to ffset)					
☐ Check	if this claim rela	tes to a						

community debt

Date debt was incurred ____

\$36,854.00

_____ Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

Debtor 1 Robert Hurst Document Anderson, Jr Page 22 of 61
First Name Middle Name Last Name

Case number (if known)

	Part 1:	Additional Page After listing any entries on thi followed by 2.4, and so forth.	s page, number them beginning with 2.3,	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2	Creditor's 2800 T/ Number OWENS City Who ow Debt Debt At le anot Chee	Street SBORO, KY 42301 State ZIP Code res the debt? Check one. tor 1 only tor 2 only tor 1 and Debtor 2 only ast one of the debtors and	Describe the property that secures the claim: Lot 4, Block 3, Wilderness Run 5th Addition, Dakota 6680 Saint Croix Trl S Hastings, MN 55033-9125 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or some Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	t apply.	\$1,369,000.00	\$0.00
	Add the	•	Last 4 digits of account number Column A on this page. Write that number here: the dollar value totals from all pages.	\$970,465.00 \$1,007,319.00		

	ation to identify yo				
Debtor 1	Robert	Hurst	Anderson, Jr	 	
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court fo	or the: District ofM	innesota		
	-				☐ Check if this is a

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

F	Part 1: List All of Your PRIORITY	Unsecured Claims			
1.	Do any creditors have priority unsecut ☐ No. Go to Part 2. ☑ Yes.	red claims against you?			
2.	claim listed, identify what type of claim it i amounts. As much as possible, list the cla fill out the Continuation Page of Part 1. If	ns. If a creditor has more than one priority unsecured claim, list s. If a claim has both priority and nonpriority amounts, list that caims in alphabetical order according to the creditor's name. If yo more than one creditor holds a particular claim, list the other creditors are the instructions for this form in the instruction booklet.)	claim here and show ou have more than t	w both priority an	nd nonpriority
			Total claim	Priority amount	Nonpriority amount
2.1	INTERNAL REVENUE SERVICE Priority Creditor's Name PO BOX 7346 Number Street PHILADELPHIA, PA 19101-7346 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes Remarks: 2017 - \$1,216,989 2018 - \$188,360 2019 - \$14,728 2020 - \$250,084 2021 - \$144,182 2022 - \$80,922	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxic Other. Specify	\$1,895,267.00	\$475,189.00	\$1,420,078.00

Entered 01/04/24 17:58:41 Desc Main Case 24-30025 Doc 1 Filed 01/04/24 Page 24 of 61 Document Debtor 1 Robert Hurst Anderson, Jr Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **√** Yes List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** AMERICAN EXPRESS Last 4 digits of account number \$9,197.00 Nonpriority Creditor's Name When was the debt incurred? **GENERAL INQUIRIES** PO BOX 981535 As of the date you file, the claim is: Check all that apply. Number Street Contingent EL PASO, TX 79998-1535 Unliquidated ZIP Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ✓ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Credit Card Is the claim subject to offset? **☑** No ☐ Yes 4.2 HUNTER'S ROCK INC. \$12,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2855 ANTHONY LN S # 130 S #130 Number Street As of the date you file, the claim is: Check all that apply. □ Contingent **MINNEAPOLIS, MN 55418-3265**

Who incurred the debt? Check one.

At least one of the debtors and another

☐ Check if this claim is for a community debt

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

✓ Debtor 1 only

☐ Debtor 2 only

☑ No ☐ Yes Unliquidated

■ Student loans

priority claims

Type of NONPRIORITY unsecured claim:

☑ Other. Specify Consumer Debt

Obligations arising out of a separation agreement or divorce that you did not report as

☐ Debts to pension or profit-sharing plans, and other similar debts

Disputed

ZIP Code

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Case number (if known)

Debtor 1

 Robert
 Hurst
 Anderson, Jr

 First Name
 Middle Name
 Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page **Total claim** After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. JILL ANDERSON. Last 4 digits of account number \$560,000.00 Nonpriority Creditor's Name When was the debt incurred? 5178 SUNTIDE PASS Number As of the date you file, the claim is: Check all that apply. Contingent SAINT PAUL, MN 55129 Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans Debtor 2 only ☐ Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt **☑** Other. Specify Any Liability Is the claim subject to offset? **☑** No ☐ Yes 4.4 UNITED HEALTH CARE Last 4 digits of account number \$12,000.00 Nonpriority Creditor's Name When was the debt incurred? CUSTOMER SERVICE -PRIVACY UNIT PO BOX 740815 As of the date you file, the claim is: Check all that apply. Number Street Contingent ATLANTA, GA 30374-0815 Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Medical Bill Is the claim subject to offset? **☑** No ☐ Yes

Debtor 1 Robert Hurst Document Page 26 of 61

Anderson, Jr Case number (if known)

	First Name	Middle Name	Last Name
Part 2:	Your NONPRIOR	ITY Unsecured Cla	nims — Continuation Page
After listing	any entries on this p	age, number them be	ginning with 4.4, followed by 4.5, and so forth.
Nonprio	REZ OF MINNESOTA prity Creditor's Name V 23RD ST STE 100 r Street		Last 4 digits of account number \$700.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply.
City	UIS PARK, MN 55416 State	ZIP	Code Contingent Unliquidated Disputed
☑ Del □ Del □ At I	occurred the debt? Che otor 1 only otor 2 only otor 1 and Debtor 2 on east one of the debtors eck if this claim is for	ly s and another	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Consumer Debt
Is the o ☑ No ☐ Yes		t?	

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Debtor 1

 Robert
 Hurst
 Anderson, Jr

 First Name
 Middle Name
 Last Name

__ Case number (if known) __

		ts of certain types of unsecured claims. This information is s for each type of unsecured claim.	for st	atist	ical reporting purposes on
					Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.		\$0.00
TOIII FAIL I	6b.	Taxes and certain other debts you owe the government	6b.		\$1,895,267.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.		\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00
	6e.	Total. Add lines 6a through 6d.	6e.	•	\$1,895,267.00
					Total claim
otal claims	6f.	Student loans	6f.		\$0.00
om Part 2					
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+	\$593,897.00
	6j.	Total. Add lines 6f through 6i.	6j.	•	\$593,897.00

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Fill in this information	n to identify your case): :		
Debtor 1	Robert	Hurst	Anderson, Jr	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Bank	ruptcy Court for the:		District of Minnesota	
Case number				
(II KIIOWII)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with whom you	have the contract or lease	State what the contract or lease is for
2.1				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.2				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.3				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.4				
	Name			
	Number	Street		
	City	State	ZIP Code	

Fill in this inform	ation to identify yo	our case:			
Debtor 1	Robert	Hurst	Anderson, Jr		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Sankruptcy Court fo	or the: District ofN	1innesota		
Case number					Charle if this is an
(if known)					Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

know	n). Answ	ver every ques	stion.		
1.	Do you ✓ No ☐ Yes	·	debtors? (If you are filing a joint case, do	not list either spouse as a	codebtor.)
2.	Within	the last 8 yea			Community property states and territories include Arizona,
	_		isiana, Nevada, New Mexico, Puerto Rico	, Texas, Washington, and V	Visconsin.)
		Go to line 3.		on with way at the time of	
			use, former spouse, or legal equivalent liv	e with you at the time?	
	_	No Voc. In which	community state or territory did you live?		Fill in the name and current address of that person.
	_	res. In which	community state or territory did you live?		Fill in the name and current address of that person.
		Name of your	spouse, former spouse, or legal equivale	nt	
		Number	Street		
		City	State	ZIP Code	
3.	2 agair	n as a codebto	or only if that person is a guarantor or o	cosigner. Make sure you l	your spouse is filing with you. List the person shown in line have listed the creditor on <i>Schedule D</i> (Official Form 106D), <i>fule D</i> , <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.
	Columi	n 1: Your code	btor		Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:
3.1					
	Name				☐ Schedule D, line
					Schedule E/F, line
	Numbe	er	Street		☐ Schedule G, line
	City		State	ZIP Code	-
3.2					
	Name				☐ Schedule D, line
	Niconala a		Chroot		Schedule E/F, line
	Numbe	ei.	Street		☐ Schedule G, line
	City		State	ZIP Code	-

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Fill	in this information to ident	tify your case	:								
D	ebtor 1 Rob			Anderson, Jr .ast Name							
Of SO Be a info spoo	ebtor 2 pouse, if filing) First N nited States Bankruptcy Coase number known) ficial Form 106 Chedule I: Yo as complete and accurate rmation. If you are married use is not filing with you, itional pages, write your n	ourt for the:	Dis	ouse is living with our spouse. If mo	r (De h you ore s _l	i, include info pace is need	ormation a	An a cha cha	spouse. If you	owing postpe e as of the fo	12/15 ying correct ed and your
	rt 1: Describe Emplo		e namber (ii known).	Allower every que							
1.	Fill in your employment information.			Debtor 1				D	ebtor 2 or nor	n-filing spou	se
	If you have more than on attach a separate page w information about addition employers.	vith nal O o	mployment status ccupation mployer's name	Employed	ØN	ot Employed		□ _{En}	nployed \square No	ot Employed	
	Include part time, season self-employed work.	iai, or	mployer's address								
	Occupation may include sor homemaker, if it applie			Number Street	t			Numb	per Street		
		Н	ow long employed the	City		State	Zip Code	City		State 2	Zip Code
Ра	art 2: Give Details Abo	out Monthl	y Income								
	Estimate monthly incom unless you are separated If you or your non-filing sp more space, attach a sep	l. pouse have n	nore than one employe		_	tion for all en		r that perso	n on the lines		
2.	List monthly gross wage deductions.) If not paid m				2.		\$0.00		\$0.00		
3.	Estimate and list monthl	y overtime p	ay.		3.	+	\$0.00	+	\$0.00		

\$0.00

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1 Robert Hurst Anderson, Jr Case number (if known) ______
First Name Middle Name Last Name

			For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here→	4.	\$0.00	\$0.00	0_
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00	0_
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	<u> </u>
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	<u> </u>
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	<u> </u>
	5e. Insurance	5e.	\$0.00	\$0.00	<u>0</u>
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	<u> </u>
	5g. Union dues	5g.	\$0.00	\$0.00	
	5h. Other deductions. Specify:	5h.	+ \$0.00	+ \$0.00	
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$0.00	\$0.00	<u>0</u>
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$0.00	0_
8.	List all other income regularly received:				
	8a. Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$7,700.00	\$0.00	0
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	ob.	Ψ0.00	φο.σε	<u>~</u>
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	0_
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	<u> </u>
	8e. Social Security	8e.	\$0.00	\$0.00	
	8f. Other government assistance that you regularly receive				_
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	<u>) </u>
	8g. Pension or retirement income	8g.	\$0.00	\$0.00	<u>0</u>
	8h. Other monthly income. Specify:	8h.	+ \$0.00	+\$0.00	<u>0</u>
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$7,700.00	\$0.0	<u>10</u>
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$7,700.00	\$0.0	00 = \$7,700.0
11.	State all other regular contributions to the expenses that you list in Sched	dule J.			
	Include contributions from an unmarried partner, members of your household friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a				
	Specify:				11. + \$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistics				12. \$7,700.0
					Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this for	orm?			
	□ No. □ Debtor's girlfriend in not currently employed □ Yes. Explain:				

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Debtor 1 Robert Anderson, Jr Hurst Case number (if known) _ First Name Middle Name Last Name 8a. Attached Statement **Top Source Media LLC** FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: 1. Gross Monthly Income: \$18,000.00 PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: Ordinary and necessary expense \$1,500.00 3. Net Employee Payroll (Other than debtor) \$8,800.00 Payroll Taxes \$0.00 4. **Unemployment Taxes** \$0.00 5. 6. Worker's Compensation \$0.00 7. Other Taxes \$0.00 Inventory Purchases (Including raw materials) 8. \$0.00 Purchase of Feed/Fertilizer/Seed/Spray \$0.00 10. Rent (Other than debtor's principal residence) \$0.00 11. Utilities \$0.00 12. Office Expenses and Supplies \$0.00 \$0.00 13. Repairs and Maintenance 14. Vehicle Expenses \$0.00 \$0.00 15. Travel and Entertainment 16. Equipment Rental and Leases \$0.00 17. Legal/Accounting/Other Professional Fees \$0.00 18. Insurance \$0.00 19. Employee Benefits (e.g., pension, medical, etc.) \$0.00 20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition **Business Debts** TOTAL PAYMENTS TO SECURED CREDITORS \$0.00 21. Other Expenses TOTAL OTHER EXPENSES \$0.00

22. TOTAL MONTHLY EXPENSES(Add item 2 - 21)
PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1)

\$10,300.00

\$7,700.00

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				Doddinent	1 age 00 01 01			
F	ill in this information	to identify your cas	e:					
	Debtor 1	Robert	Hurst	Anderson,	Jr	01 1 7 7 1		
		First Name	Middle Name	Last Name		Check if th	ns is: ended filing	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			•	postpetition chapter 13
	United States Bankr		Middle Name	District of Mi	nnosota	expens	ses as of the foll	owing date:
	Case number	upicy Court for the.		DISTRICT OF WILL	micsota	MM / DI	D / YYYY	
	(if known)							
<u>O</u>	official Form	106J						
S	chedule J	l: Your Ex	penses					12/15
Ве	as complete and a	ccurate as possible	. If two married pe					orrect information. If more
sp	ace is needed, attac	ch another sheet to	this form. On the t	top of any addit	tional pages, write your na	ame and case	e number (if kno	wn). Answer every question.
Р	art 1: Describe	Your Household						
1	. Is this a joint cas							
	No. Go to line							
	☐ Yes. Does Del	otor 2 live in a sepa	rate household?					
	_	Debtor 2 must file (Official Form 106.I-2	2 Expenses for	Separate Household of De	ehtor 2		
2	. Do you have dep		□ _{No}	_, <i></i> ,	Coparate Fredericia er Be	00101 2.		
	Do not list Debtor		Yes. Fill out thi	is information	Dependent's relationship	•	Dependent's	Does dependent live
	Debtor 2. Do not state the o	dependents'	for each deper				age	with you?
	names.				Child			□ No. ☑ Yes.
					Child			□ No. ☑ Yes.
					Child			□ _{No.} ☑ Yes.
					Child			□ _{No.} ☑ Yes.
					Child			□ _{No.}
L					* See Additional Page for	or Additional	Dependents	
3	Do your expense expenses of peop yourself and you	ple other than	√ No □ _{Yes}					
P	Part 2: Estimate	Your Ongoing M	onthly Expense	es .				
					using this form as a supp eck the box at the top of t			to report expenses as of a able date.
Ir	nclude expenses pa	id for with non-cas	n government assi	istance if you k	now the value of			
	uch assistance and						You	rexpenses
4	. The rental or hon for the ground or		nses for your resid	dence. Include f	irst mortgage payments ar	nd any rent	4.	\$7,966.00
	If not included in	line 4:						
	4a. Real estate ta	ixes					4a	\$0.00
	4b. Property, hom	neowner's, or renter	s insurance				4b	\$0.00
	4c. Home mainter	nance, repair, and u	pkeep expenses				4c.	\$0.00

4d. Homeowner's association or condominium dues

4d.

\$0.00

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Debtor 1 Robert Hurst Anderson, Jr Case number (if known) Last Name Last Name

		Ye	our expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
S.	Utilities:		
	6a. Electricity, heat, natural gas	6a. <u> </u>	\$400.00
	6b. Water, sewer, garbage collection	6b. <u> </u>	\$120.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. <u> </u>	\$60.00
	6d. Other. Specify:	6d	\$120.00
.	Food and housekeeping supplies	7.	\$1,200.00
3.	Childcare and children's education costs	8.	\$0.00
).	Clothing, laundry, and dry cleaning	9.	\$200.00
0.	Personal care products and services	10.	\$200.00
1.	Medical and dental expenses	11	\$0.00
2.	Transportation. Include gas, maintenance, bus or train fare.	12.	\$580.00
2	Do not include car payments.		
	Entertainment, clubs, recreation, newspapers, magazines, and books	13	\$0.00
14.	Charitable contributions and religious donations	14	\$0.00
5.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a. —	\$0.00
	15b. Health insurance		\$0.00
	15c. Vehicle insurance	15c	\$0.00
	15d. Other insurance. Specify:	15d.	\$0.00
		_	
о.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$0.00
_			
7.	Installment or lease payments:	17a.	\$1,071.00
	17a. Car payments for Vehicle 1 2021 Mercedes-Benz	17b.	\$0.00
	17b. Car payments for Vehicle 2	17c.	·
	17c. Other. Specify:	_	\$0.00
	17d. Other. Specify:	17d. <u> </u>	\$0.00
	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$0.00
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$0.00
0.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ie.	
	20a. Mortgages on other property	20a. <u> </u>	\$0.00
	20b. Real estate taxes	20b	\$0.00
	20c. Property, homeowner's, or renter's insurance	20c	\$0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
	20e. Homeowner's association or condominium dues	20e.	\$0.00

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Debtor 1		Robert	Hurst	Anderson, Jr	Case number (if known)		
		First Name	Middle Name	Last Name			
21.	Other. Spe	cify:			21. +	\$0.00	
22.	Calculate y	our monthly expe	enses.				
	22a. Add li	nes 4 through 21.		22a	\$11,917.00		
	22b. Copy	line 22 (monthly e	xpenses for Debtor 2), i	22b	\$0.00		
	22c. Add lii	ne 22a and 22b. T	he result is your monthl	y expenses.	22c	\$11,917.00	
23.	Calculate y	our monthly net i	ncome.				
	23а. Сору	line 12 (your comb	pined monthly income) f	23a. <u> </u>	\$7,700.00		
	23b. Copy	your monthly expe	enses from line 22c abo	23b	\$11,917.00		
	23c. Subtra	act your monthly e	xpenses from your mon		(4		
	The result is your monthly net income.				23c	(\$4,217.00)	
	_						
24.	Do you exp	oect an increase o	or decrease in your exp	enses within the year after you file the	his form?		
			to finish paying for your se or decrease because				
	☑ No. ☐ Yes.	None					

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Debtor 1	Robert	Hurst	Anderson, Jr	Case number (if known)	
	First Name	Middle Name	Last Name		
2. Additio	onal Dependents		Dependent's relationshi Debtor 1 or Debtor 2	p to Dependent's age	Does dependent live with you?
			Relative		. □ _{No.} ☑ _{Yes.}

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Fill in this information	n to identify your case	:		
Debtor 1	Robert	Hurst	Anderson, Jr	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:		District of Minnesota	
Case number (if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

this is an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$1,369,000.00 \$20,109.00 \$1,389,109.00
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$1,007,319.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$1,895,267.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$593,897.00
Part 3: Summarize Your Income and Expenses	\$3,496,483.00
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$7,700.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$11,917.00

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Debtor 1	Robert	Hurst	Anderson, Jr	Case number (if known)
	First Name	Middle Name	Last Name	

Pa	rt 4: Answer These Questions for Administrative and Statistical Records		
Į	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the form.	he court with your other sched	lules.
•	What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 Your debts are not primarily consumer debts. You have nothing to report on this part of the form to the court with your other schedules.	U.S.C. § 159.	i.
B. F	From the Statement of Your Current Monthly Income: Copy your total current monthly income from 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	n Official	\$12,171.50
9. C	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	
	From Part 4 on Schedule E/F, copy the following:		
	9a. Domestic support obligations (Copy line 6a.)	\$0.00	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$1,895,267.00</u>	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy line 6f.)	\$0.00	
	9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00	
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) 9g. Total . Add lines 9a through 9f.	+ \$0.00 \$1.895,267.00	

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Fill in this information	to identify your case	:		
Debtor 1	Robert	Hurst	Anderson, Jr	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:		District of Minnesota	
Case number (if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an atto	orney to help you fill out bankruptcy forms?
☑ No ☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the sur	mmary and schedules filed with this declaration and that they are true and correct.
S/ Robert Hurst Anderson, Jr Robert Hurst Anderson, Jr, Debtor 1	
Date 01/04/2024 MM/ DD/ YYYY	

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Fill in this information	n to identify your case	:		
Debtor 1	Robert	Hurst	Anderson, Jr	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:		District of Minnesota	
Case number				
,				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

N4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

☐ Married ☑ Not married					
	s, have you lived anywhe	re other than where you li	ive now?		
Yes. List all of the p	places you lived in the last	3 years. Do not include with Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
lumber Street		_ From To	Same as Debtor 1 Number Street		Same as Debtor 1 From To
City	State ZIP Code	_	City	State ZIP Code	-
lumber Street		_ From To	Same as Debtor 1 Number Street		Same as Debtor 1 From To
City	State ZIP Code		City	State ZIP Code	-
Within the last 8 years ritories include Arizona ☑ No	s, did you ever live with a a, California, Idaho, Louisi	spouse or legal equivaler ana, Nevada, New Mexico	nt in a community property, Puerto Rico, Texas, Wash	state or territory?(Comnington, and Wisconsin.)	munity property states ai

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Case number (if known) _

Anderson, Jr

Did you have any income from employme I in the total amount of income you receive you are filing a joint case and you have inc	ed from all jobs and all busin	esses, including part-time a	activities.	eai 5 :
□ No	, ,	•		
Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income	Gross Income	Sources of income	Gross Income
	Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
rom January 1 of current year until the late you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips		☐ Wages, commissions, bonuses, tips	
,		\$4,000.00	Operating a business	
for last calendar year: January 1 to December 31, 2023)	☐ Wages, commissions, bonuses, tips		☐ Wages, commissions, bonuses, tips	
YYYY	✓ Operating a business	\$392,000.00	Operating a business	
•	☐ Wages, commissions, bonuses, tips		☐ Wages, commissions, bonuses, tips	
For the calendar year before that: January 1 to December 31, 2022 YYYYY Did you receive any other income during slude income regardless of whether that in blic benefit payments; pensions; rental income a joint case and you have income that you	bonuses, tips Operating a business this year or the two previous come is taxable. Examples come; interest; dividends; more than the come; interest; dividends; dividends; dividends; dividends; dividen	of other income are alimony oney collected from lawsuits	bonuses, tips Operating a business y; child support; Social Secu	
Did you receive any other income during lude income regardless of whether that in olic benefit payments; pensions; rental inc g a joint case and you have income that y No	bonuses, tips Operating a business this year or the two previous come is taxable. Examples come; interest; dividends; more than the come; interest; dividends; dividends; dividends; dividends; dividen	of other income are alimony oney collected from lawsuits	bonuses, tips Operating a business y; child support; Social Secu	
Did you receive any other income during lude income regardless of whether that in olic benefit payments; pensions; rental inc g a joint case and you have income that y No	bonuses, tips Operating a business this year or the two previous come is taxable. Examples come; interest; dividends; more than the come; interest; dividends; dividends; dividends; dividends; dividen	of other income are alimony oney collected from lawsuits	bonuses, tips Operating a business y; child support; Social Secu	
January 1 to December 31, 2022 YYYYY Did you receive any other income during slude income regardless of whether that in	bonuses, tips Operating a business I this year or the two previo come is taxable. Examples come; interest; dividends; moyou received together, list it	of other income are alimony oney collected from lawsuits	bonuses, tips Operating a business y; child support; Social Secus; royalties; and gambling an	
Did you receive any other income during lude income regardless of whether that in olic benefit payments; pensions; rental incig a joint case and you have income that you have	bonuses, tips Operating a business I this year or the two previo come is taxable. Examples come; interest; dividends; moyou received together, list it of the provious of th	of other income are alimony oney collected from lawsuits only once under Debtor 1. Gross income from	bonuses, tips Operating a business y; child support; Social Secus; royalties; and gambling and Debtor 2 Sources of income	Gross Income from each source
Did you receive any other income during lude income regardless of whether that in blic benefit payments; pensions; rental incig a joint case and you have income that y No Yes. Fill in the details.	bonuses, tips Operating a business I this year or the two previo come is taxable. Examples come; interest; dividends; moyou received together, list it of the property of th	of other income are alimony oney collected from lawsuits only once under Debtor 1. Gross income from each source (before deductions and	bonuses, tips Operating a business y; child support; Social Secus; royalties; and gambling and Debtor 2 Sources of income	Gross Income from each source (before deductions and
Did you receive any other income during lude income regardless of whether that in olic benefit payments; pensions; rental incig a joint case and you have income that y No Yes. Fill in the details.	bonuses, tips Operating a business I this year or the two previo come is taxable. Examples come; interest; dividends; moyou received together, list it of the property of th	of other income are alimony oney collected from lawsuits only once under Debtor 1. Gross income from each source (before deductions and	bonuses, tips Operating a business y; child support; Social Secus; royalties; and gambling and Debtor 2 Sources of income	Gross Income from each source (before deductions and
Did you receive any other income during lude income regardless of whether that in blic benefit payments; pensions; rental incig a joint case and you have income that you have you have income that you have income that you have income that yo	bonuses, tips Operating a business I this year or the two previo come is taxable. Examples come; interest; dividends; moyou received together, list it of the property of th	of other income are alimony oney collected from lawsuits only once under Debtor 1. Gross income from each source (before deductions and	bonuses, tips Operating a business y; child support; Social Secus; royalties; and gambling and Debtor 2 Sources of income	Gross Income from each source (before deductions and
January 1 to December 31, 2022 YYYYY Did you receive any other income during lude income regardless of whether that in olic benefit payments; pensions; rental income a joint case and you have income that y № No Yes. Fill in the details.	bonuses, tips Operating a business I this year or the two previo come is taxable. Examples come; interest; dividends; moyou received together, list it of the property of th	of other income are alimony oney collected from lawsuits only once under Debtor 1. Gross income from each source (before deductions and	bonuses, tips Operating a business y; child support; Social Secus; royalties; and gambling and Debtor 2 Sources of income	Gross Income from each source (before deductions and

Debtor 1

Robert

Hurst

Case 24-30025 Doc 1 Filed 01/04/24 Entered 01/04/24 17:58:41 Desc Main Page 42 of 61 Document Robert Anderson, Jr Debtor 1 Hurst Case number (if known). First Name Middle Name Last Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment ■ Mortgage Creditor's Name ☐ Car ☐ Credit card Number Loan repayment ☐ Suppliers or vendors Other ___ City State ZIP Code 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. **✓** No Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment Insider's Name Number Street City State ZIP Code

Filed 01/04/24 Entered 01/04/24 17:58:41 Case 24-30025 Doc 1 Desc Main Page 43 of 61 Document Anderson, Jr Debtor 1 Robert Hurst Case number (if known) First Name Last Name Middle Name 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. **√** No \square Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment

	payment	owe	h	nclude creditor's name	
Insider's Name		<u> </u>			
		-			
Number Street		_			
	_				
City State ZIP Code					
rt 4: Identify Legal Actions, Repo	ecoccions and For	oclosuros			
14. Identify Legal Actions, Repo	ssessions, and roi	eciosures			
Within 1 year before you filed for bankru	ptcy, were you a party	in any lawsuit, court action,	or administrative p	roceeding?	
st all such matters, including personal inju					modifications,
ntract disputes.					
√No					
Yes. Fill in the details.					
	Nature of the case	Court or a	gency	Status	of the case
Case title				Pend	ling
		Court Name		☐ On a	ppeal
		Number S	Street	Cond	luded
Case number		Number	arcet		
		City	State	ZIP Code	
). Within 1 year before you filed for bankr	untey was any of you	r nronerty renossessed forec	losed garnished :	attached seized or k	evied?
neck all that apply and fill in the details beli	ow.	property representation, refere	.ooou, gurmonou, t	,	71.04
☑ No. Go to line 11.					
Yes. Fill in the information below.					
	Descr	ibe the property	Da	ate Value	e of the prope
Creditor's Name			-		
Number Street	Expla	n what happened			
	Pro	perty was repossessed.			
	Pro	perty was foreclosed.			
	Pro	perty was garnished.			

State

ZIP Code

City

Property was attached, seized, or levied.

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Debtor 1 Robert Hurst Anderson, Jr Case number (if known) Last Name

Last Name

Within 90 days before you filed fouse to make a payment because to Moon with the course to Moon with t					
use to make a payment because y		/, did any creditor, including a bank o	r financial institution	. set off any amou	nts from your accounts
_				, cot on any amou	mo nom your account
Yes. Fill in the details.					
		Describe the action the creditor too	k	Date action was	Amount
Des dite de Nieure				taken	
Creditor's Name					
Number Street					
City State Z	ZIP Code	Last 4 digits of account number: XXX	v		
		Last 4 digits of account number. AAA	<u> </u>		
√ No					
■ Yes					
t 5: List Certain Gifts and C	Contribution	15			
Yes. Fill in the details for each g		Describe the gifts			
				Dates you gave	Value
per person				the gifts	Value
					Value
per person					Value
per person					Value
per person					Value
per person Person to Whom You Gave the Gift					Value
per person Person to Whom You Gave the Gift					Value
Person to Whom You Gave the Gift Number Street	ZIP Code				Value
Person to Whom You Gave the Gift Number Street City State	ZIP Code				Value
Person to Whom You Gave the Gift Number Street City State	ZIP Code				Value
Person to Whom You Gave the Gift Number Street City State Person's relationship to you				the gifts	
Person to Whom You Gave the Gift Number Street City State Person's relationship to you		r, did you give any gifts or contributio	ns with a total value	the gifts	
Person to Whom You Gave the Gift Number Street City State Person's relationship to you Within 2 years before you filed for		, did you give any gifts or contributio	ns with a total value	the gifts	
Person to Whom You Gave the Gift Number Street City State Person's relationship to you	or bankruptcy		ns with a total value	the gifts	
Person to Whom You Gave the Gift Number Street City State Person's relationship to you	or bankruptcy		ns with a total value	the gifts	
Person to Whom You Gave the Gift Number Street City State Person's relationship to you Within 2 years before you filed for No	or bankruptcy		ns with a total value	the gifts	
Person to Whom You Gave the Gift Number Street City State Person's relationship to you Within 2 years before you filed for No	or bankruptcy		ns with a total value	the gifts	

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or 1	Robert				
	First Name	Middle Name	Last Name		
	contributions to cha more than \$600	rities Describe	e what you contributed	Date you contributed	Value
Charity's Na	me.				
lumber	Street				
City	State ZI	P Code			
t 6: Lis	t Certain Losses				
Within 1 nbling?	year before you file	d for bankruptcy or	since you filed for bankruptcy, did yo	u lose anything because of theft	, fire, other disaster, or
∑ No					
Yes. Fil	Il in the details.				
				Date of your loss	Value of property lost
Describe how the I	the property you lo loss occurred	Include the	Iny insurance coverage for the loss amount that insurance has paid. List proclaims on line 33 of Schedule A/B: Prop	ending	
Describe how the I	the property you lo loss occurred	Include the	amount that insurance has paid. List pe	ending	
Describe how the I	the property you lo loss occurred	Include the	amount that insurance has paid. List pe	ending	
how the I	the property you lo loss occurred	Include the insurance of	e amount that insurance has paid. List peclaims on line 33 of <i>Schedule A/B: Prop</i>	ending	
t 7: Lis Within 1 but seekin lude any a	at Certain Payme year before you file ng bankruptcy or pr attorneys, bankruptc	Include the insurance of the insurance o	e amount that insurance has paid. List peclaims on line 33 of Schedule A/B: Prop	ending erty. ehalf pay or transfer any proper	ty to anyone you consulted
t 7: Lis Within 1 but seekir lude any a No Yes. Fil	at Certain Payme year before you file ng bankruptcy or pr attorneys, bankruptc	Include the insurance of the insurance o	e amount that insurance has paid. List peclaims on line 33 of Schedule A/B: Properties	ending enty. ehalf pay or transfer any proper ces required in your bankruptcy. ed Date payment or	Amount of payment
t 7: Lis Within 1 but seekin lude any a No Yes. Filling Fee	at Certain Payme year before you file ng bankruptcy or pr attorneys, bankruptc	Include the insurance of the insurance o	amount that insurance has paid. List peclaims on line 33 of Schedule A/B: Properties on line 34	ending enty. ehalf pay or transfer any proper ces required in your bankruptcy.	Amount of payment
t 7: Lis Within 1 Dut seekir lude any a No Yes. Fil	t Certain Payme year before you file ng bankruptcy or pr attorneys, bankruptc	Include the insurance of the insurance o	amount that insurance has paid. List peclaims on line 33 of Schedule A/B: Properties on line 34	ending enty. ehalf pay or transfer any proper ces required in your bankruptcy. ed Date payment or	Amount of payment
t 7: Lis Within 1 out seekir lude any a No Yes. Fil	t Certain Payme year before you file ng bankruptcy or pr attorneys, bankruptc Il in the details.	Include the insurance of the insurance o	amount that insurance has paid. List peclaims on line 33 of Schedule A/B: Properties on line 34	ending enty. ehalf pay or transfer any proper ces required in your bankruptcy. ed Date payment or	Amount of payment
t 7: Lis Within 1 but seekir lude any a No Yes. Fil Filing Fee Person Who	t Certain Payme year before you file ng bankruptcy or pr attorneys, bankruptc Il in the details.	Include the insurance of the insurance o	amount that insurance has paid. List peclaims on line 33 of Schedule A/B: Properties on line 34	ending enty. ehalf pay or transfer any proper ces required in your bankruptcy. ed Date payment or	Amount of payment

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otor 1	Robert	Hurst	Anderson, Jr	Case number (if kno	wn)
	First Name	Middle	Name Last Name		
	Walker Law Office	es PLLC	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who	Was Paid				
4356 Nico	llet Ave S				\$2,047.00
lumber	Street				
Minneanol	is, MN 55409				
City		ZIP Code			
mail or web	osite address				
Person Who	Made the Paymen	t, if Not You			
Credit Cou	unseling Course		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
erson Who					\$15.00
lumber	Street				\$13.00
ity	State	ZIP Code			
mail or web	osite address				
inali oi woc	ono addroso				
Person Who	Made the Paymen	t, if Not You			
Ip you dea o not includ ✓ No	l with your credi	itors or to ma	cruptcy, did you or anyone else acting on your behalf pa ake payments to your creditors? It you listed on line 16.	ay or transfer any property	to anyone who promised
			Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who	Was Paid			transier was made	
lumber	Street				
					
City	State	ZIP Code			
linary cou	rse of your busion outright transfers	ness or finar and transfer	s made as security (such as the granting of a security inte		
not includ √ No	e gifts and transf	ers that you	have already listed on this statement.		
Yes. Fill	in the details.				

Case 24-30025 Doc 1 Filed 01/04/24 Entered 01/04/24 17:58:41 Desc Main Page 47 of 61 Document Debtor 1 Robert Hurst Anderson, Jr Case number (if known) First Name Middle Name Last Name Description and value of property Describe any property or payments Date transfer was transferred received or debts paid in exchange Person Who Received Transfer Number City ZIP Code Person's relationship to you -19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) **✓** No Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust _ List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. **✓** No Yes. Fill in the details. Last 4 digits of account number Type of account or Last balance Date account was instrument closed, sold, moved, or before closing or transferred transfer Name of Financial Institution XXXX-_ ☐ Checking Savings Number Street ☐ Money market Brokerage Other ___ State **ZIP Code** City 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? **✓** No

Yes. Fill in the details.

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tor 1	Robert	Hurst	Anderson, Jr	Case number (if I	known)
	First Name	Middle N	Name Last Name		
			Who else had access to it?	Describe the contents	Do you still have it?
					□No
lame of Fi	nancial Institution		Name		Yes
Number	Street		Number Street		
			City State ZIP Code		
City	State Z	ZIP Code			
. Have yo	ou stored property in	n a storage	unit or place other than your home withir	1 year before you filed for bankrupto	cy?
√ No					
☐ Yes. Fi	ill in the details.		Who also has as had access to \$2	Describe the contents	Do way atill base
			Who else has or had access to it?	Describe the contents	Do you still have it?
Name of St	torage Facility		Name		□No
taino oi ot	iorago i aomiy		Tallio .		Yes
Number	Street		Number Street		
			City State ZIP Code		
City	State Z	ZIP Code			
rt 9: Ide	entify Property Y	ou Hold c	or Control for Someone Else		
. Do you l	hold or control any	property th	at someone else owns? Include any prop	erty you borrowed from, are storing	for, or hold in trust for some
√ No					
	ill in the details.				
	ill in the details.		Where is the property?	Describe the property	Value
☐ Yes. Fi				Describe the property	Value
☐ Yes. Fi			Where is the property? Number Street	Describe the property	Value
Yes. Fi			Number Street	Describe the property	Value
✓ No ☐ Yes. Fi Owner's Na Number	ame			Describe the property	Value

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Debtor 1	Robert	Hurst	Anderson, Jr	Case number (if known)
	First Name	Middle Name	Last Name	
Part 10: Give	e Details About E	Environmental Infor	mation	

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

√INo			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
value of Site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code	<u> </u>		
√ 1 No	tal unit of any release of hazardous mate		
√ 1 No	tal unit of any release of hazardous mate	Environmental law, if you know it	Date of notice
☑ No ☐ Yes. Fill in the details.			Date of notice
☑ No ☐ Yes. Fill in the details.	Governmental unit		Date of notice
☑ No ☑ Yes. Fill in the details. Name of site	Governmental unit		Date of notice
☑ No ☑ Yes. Fill in the details. Name of site	Governmental unit Governmental unit		Date of notice
☑ No ☐ Yes. Fill in the details. Name of site	Governmental unit Governmental unit Number Street City State ZIP Code		Date of notice
✓ No ☐ Yes. Fill in the details. Name of site Number Street	Governmental unit Governmental unit Number Street City State ZIP Code		Date of notice
Yes. Fill in the details. Name of site Number Street City State ZIP Code	Governmental unit Governmental unit Number Street City State ZIP Code	Environmental law, if you know it	
Yes. Fill in the details. Name of site Number Street City State ZIP Code i. Have you been a party in any judice	Governmental unit Governmental unit Number Street City State ZIP Code		
✓ No ☐ Yes. Fill in the details. Name of site Number Street City State ZIP Code	Governmental unit Governmental unit Number Street City State ZIP Code	Environmental law, if you know it	

Entered 01/04/24 17:58:41 Desc Main Doc 1 Filed 01/04/24 Page 50 of 61 Document Robert Anderson, Jr Debtor 1 Hurst Case number (if known). Middle Name Last Name First Name Court or agency Nature of the case Status of the case Case title -□ Pending **Court Name** On appeal ☐ Concluded Number Street Case number City State **ZIP Code** Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation ✓ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Name Number Street Dates business existed Name of accountant or bookkeeper _ To _ **ZIP Code** City State 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. **√**No ☐ Yes. Fill in the details below. Date issued MM / DD / YYYY Name Street Number **ZIP Code** City State

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Debtor 1 Robert Hurst Anderson, Jr Case number (if known) Last Name Last Name

Part 12: Sign Below	
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I dec and correct. I understand that making a false statement, concealing property, or obtaining mo bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or bot	oney or property by fraud in connection with a
X s/ Robert Hurst Anderson, Jr Signature of Robert Hurst Anderson, Jr, Debtor 1 Date 01/04/2024	
Did you attach additional pages to your <i>Statement of Financial Affairs for Individuals Filing fo</i> ✓ No	or Bankruptcy (Official Form 107)?
Yes Yes	
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy for 100 No	orms? Attach the Bankruptcy Petition Preparer's Notice,
☐ Yes. Name of person	Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:					
Debtor 1	Robert	Hurst	Anderson, Jr		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:			District of Minnesota		
Case number					
(if known)					

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

art 1: List You	ur Creditors Who Have Secured Claims	S	
For any credito below.	rs that you listed in Part 1 of Schedule D: Cre	editors Who Have Claims Secured by Property (Official Forn	n 106D), fill in the information
Identify the cre	ditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name:	US Bank Home Mortgage	Surrender the property.	☐ No ☑ Yes
Description of property securing debt:	Lot 4, Block 3, Wilderness Run 5th Addition, Dakota County, Minnesota 6680 Saint Croix Trl S Hastings, MN	 Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. 	▼ Tes
cooding dobt.	55033-9125	☑ Retain the property and [explain]:	
Creditor's		☐ Surrender the property.	No
name:	Mercedes-Benz Financial Services USA	Retain the property and redeem it.	√ Yes
Description of property securing debt:	2021 Mercedes-Benz	Retain the property and enter into a Reaffirmation Agreement.	
coding dobt.		☑ Retain the property and [explain]:	

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Robert	Hurst	Anderson, Jr	Case number (if known)
First Name	Middle Name	Last Name	
ur Unexpired	Personal Property	Leases	
. Do not list rea	al estate leases. Unexp	ired leases are leases that are still	
unexpired pers	sonal property leases		Will the lease be assumed?
			☐ No
eased			☐ Yes
			☐ No
eased			☐ Yes
			☐ No
eased			☐ Yes
			☐ No
eased			☐ Yes
			☐ No
eased			☐ Yes
			☐ No
eased			☐ Yes
			☐ No
eased			☐ Yes
	d personal proposition not list real property lease unexpired personal eased eased eased eased eased	d personal property lease that you list no not list real estate leases. Unexpal property lease if the trustee does not unexpired personal property leases eased eased eased eased eased	eased eased eased eased eased

Date <u>01/04/2024</u>

MM/ DD/ YYYY

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LOCAL FORM 1007-1 REVISED 06/16

UNITED STATES BANKRUPTCY COURT DISTRICT OF MINNESOTA

In re:	Anderson, Robert Hurst	Case No	D.
	Debtor(s).		
	DISCLOSURE (OF COMPENSATION OF ATTORN	EY FOR DEBTOR
(Pursuant to 11 U .S.C. § 329(a) and Fed. Ba compensation paid to me within one year be o be rendered on behalf of the debtor(s) in o	fore the filing of the petition in bankruptcy,	or agreed to be paid to me, for services rendered or
	For legal services, I have agreed to accept	:	\$2,047.00
	Prior to the filing of this statement I have re	eceived:	\$2,047.00
	Balance Due		\$0.00
2.	The source of the compensation paid to me	was:	
	☑ Debtor	Other (specify)	
3.	The source of the compensation to be paid t	o me is:	
	☑ Debtor	Other (specify)	
4.	I have not agreed to share the above-dis law firm.	sclosed compensation with any other perso	on unless they are members and associates of my
l	-		persons who are not members or associates of my rentities sharing in the compensation, is attached.
	n return for the above-disclosed fee, togethe \$528(a)(1), I have agreed to render legal ser		ed in the written contract required by 11 U.S.C. including:
	A. Analysis of the debtor's financial situa	ation, and rendering advice to the debtor in	determining whether to file a petition in bankruptcy;
	B. Preparation and filing of any petition,	schedules, statements of affairs and plan	which may be required;
	C. Representation of the debtor at the m	eeting of creditors and confirmation hearin	g, and any adjourned hearings thereof;
	D. Representation of the debtor in conte	sted bankruptcy matters; and	
	E. Other services reasonably necessary	to represent the debtor(s).	

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LOCAL FORM 1007-1 REVISED 06/16

6. Pursuant to Local Rules 1007-1 and 1007-3-1, I have advised the debtor of the requirements in the Statement of Financial Affairs to disclose all payments made, or property transferred, by or on behalf of the debtor to any person, including attorneys, for consultation concerning debt consolidation or reorganization, relief under bankruptcy law, or preparation of a petition in bankruptcy. I have reviewed the debtor's disclosures and they are accurate and complete to the best of my knowledge.

		CERTIFICATION
	3 0 0	written contract required by 11 U.S.C. §528(a)(1), is a complete statement of any agreement of the debtor(s) in this bankruptcy case.
Date:	01/04/2024	s/ Andrew Walker
		Signature of Attorney

	C-	24 20025	Dog 1 Fil	104 01 /04/	24 Ept	~ ~ ~ ~ ^	1 10 110	4 1 7.FO.	11 Doco Main	
Fill	I in this information	to identify your case:						Check one bo	ox only as directed in the	is form and in
D	ebtor 1	Robert	Hurst	Anderson,	Jr			,	s no presumption of ab	
		First Name	Middle Name	Last Name			- 1 1.	_		
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name			-	of abuse a	culation to determine if applies will be made un	der Chapter 7
	nited States Banks			District of Mi	nnosota			_	st Calculation (Official I	,
	ase number	uptcy Court for the:		DISTRICT OF WIL	illesota		-		ans Test does not appl d military service but it	
(if	known)							Check if th	nis is an amended filing	
∩f	ficial Form	122Δ-1								,
			of Vour	Curron	t Mant	hlv l	lncor	n o		
CI	iaptei 7.	<u>Statement</u>	OI YOUI	Curren	t MOH	шу	ПСОГ	пе		12/19
attac and beca with	ch a separate shee case number (if ki ause of qualifying h this form.	et to this form. Includ nown). If you believe	le the line number that you are exen uplete and file <i>Sta</i>	to which the a	additional information	ormation of abuse	n applies. because	On the top of you do not ha	ing accurate. If more so any additional pages ave primarily consumo 707(b)(2) (Official Fore	, write your name er debts or
		rital and filing status?								•
١.	,	Fill out Column A, lines								
		our spouse is filing w		oth Columns A	and B, lines	2-11.				
		our spouse is NOT fil								
	Living in t	the same household	and are not legall	y separated. F	ill out both C	olumn A	and B, line	es 2-11.		
	under pe	parately or are legally nalty of perjury that your are living apart for reas	ou and your spous	se are legally s	eparated und	er nonba	ankruptcy l	aw that applie	ng this box, you declare es or that you and your 07(b)(7)(B).	;
10 va ex	01(10A). For examparied during the 6 n	ple, if you are filing on nonths, add the incom	n September 15, the ne for all 6 months	ne 6-month per and divide the	riod would be total by 6. F	March 1	through A esult. Do r column o	ugust 31. If the state of the s	ile this bankruptcy cas ne amount of your more ny income amount more we nothing to report for	thly income e than once. For
							Colum Debto		Column B Debtor 2 or non-filing spouse	
2.	Your gross wage deductions).	s, salary, tips, bonus	es, overtime, and	commissions	(before all pa	ayroll		\$0.00		-
3.	Alimony and mai is filled in.	ntenance payments.	Do not include pa	yments from a	spouse if Co	lumn B		\$0.00	-	_
4.	your dependents unmarried partne roommates. Inclu	n any source which a s, including child sup r, members of your ho de regular contribution ents you listed on line	port. Include reguousehold, your depons from a spouse	lar contribution pendents, pare	is from an nts, and	-		\$0.00		_
5.	Net income from or farm	operating a business	s, profession,	Debtor 1	Debtor 2					
	Gross receipts (b	efore all deductions)		\$49,626.50						
	Ordinary and nec	essary operating expe	enses	- \$37,455.00	-					
	Net monthly incor	me from a business, p	orofession, or farm	\$12,171.50		Copy here		NAO 474 EO		
_						\rightarrow		\$12,171.50		•
6.		rental and other real	property	Debtor 1	Debtor 2					
	. ,	efore all deductions)		\$0.00						
	Ordinary and nec	essary operating expe	enses	- \$0.00						
	Net monthly incor	me from rental or othe	er real property	\$0.00		Copy here				
	. tot monthly moon	Tomai or office	our property			→		\$0.00		<u>-</u>
7.	Interest, dividend	ds, and royalties						\$0.00		_

De	ebtor 1	Case 24-30 Robert		Filed 01/04/24	Entered Page 57 o	01/04/24 17:58	B:41 Desc Mair	1
		First Name	Middle Name	Last Name	rage or e	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	8. Unen	nployment compens	sation			\$0.00	non ming opeace	
	Do no	ot enter the amount i	f you contend that the	amount received was	a benefit	<u> </u>		
	unde		estand list it have.		1			
		•	stead, list it here:		······ ↓ \$0.00			
	•				Ψ0.00			
	benef do no Unite disab retire that it	fit under the Social S at include any compe d States Governmer ility, or death of a me d pay paid under cha does not exceed th	come. Do not include a security Act. Also, excessorsation, pension, pay, at in connection with a sember of the uniformed apter 61 of title 10, there amount of retired pay by provision of title 10 comes.	ept as stated in the nex annuity, or allowance disability, combat-relat d services. If you receive in include that pay only by to which you would o	tt sentence, paid by the ed injury or ved any to the extent therwise be	\$0.00		
	Do r rece dom the l injur	not include any bene ived as a victim of a estic terrorism; or co Jnited States Gover y or disability, or dea	purces not listed above fits received under the war crime, a crime agompensation, pension, nment in connection wath of a member of the eparate page and put to	Social Security Act; parainst humanity, or interpay, annuity, or allowaith a disability, combatuniformed services. If	ayments national or nce paid by -related			
	11. Cal o	•	pages, if any. rent monthly income. the total for Column A	•		\$12,171.50	+	= \$12,171.50 Total current monthly income
Pa	art 2: Det	ermine Whether	the Means Test A	pplies to You				
12.	Calculate	your current monthl	y income for the year.	Follow these steps:			,	
	12a. Copy	your total current n	nonthly income from lin	ne 11			Copy line 11 here \rightarrow	\$12,171.50
	Mult	iply by 12 (the numb	er of months in a year).				x 12
	12b. The	result is your annual	income for this part of	the form.			12b.	\$146,058.00
13.	Calculate t	the median family in	come that applies to	you. Follow these step	s:			
	Fill in the s	tate in which you live	э.	Minnesota				
	Fill in the n	umber of people in y	your household.	7				
	To find a lis	st of applicable medi	e for your state and siz an income amounts, g ist may also be availab	o online using the link	specified in the	separate	13. [\$165,993.00
14.	How do the	e lines compare?						
	14a. ☑ Lir Go	ne 12b is less than o to Part 3. Do NOT	r equal to line 13. On t fill out or file Official Fo	he top of page 1, chec	k box 1, There is	s no presumption of ab	use.	
	14b. 🗆 Lir		line 13. On the top of p		he presumption	of abuse is determined	l by Form 122A-2.	

Case 24-30025 Doc 1 Debtor 1

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Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X s/ Robert Hurst Anderson, Jr

Signature of Debtor 1

Date 01/04/2024

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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IN THE UNITED STATES BANKRUPTCY COURT DISTRICT OF MINNESOTA ST. PAUL DIVISION

N RE: Anderson, Robert H	urst	CASE NO
		CHAPTER 7
VERIFICATION OF CREDITOR MATRIX		
The above named Debtor	hereby verifies that the	attached list of creditors is true and correct to the best of his/her knowledge.
Date <u>01/04/2024</u>	Signature	s/ Robert Hurst Anderson, Jr Robert Hurst Anderson, Jr, Debtor

AMERICAN EXPRESS GENERAL INQUIRIES PO BOX 981535 EL PASO, TX 79998-1535

HUNTER'S ROCK INC. 2855 ANTHONY LN S # 130 S #130 MINNEAPOLIS, MN 55418-3265

INTERNAL REVENUE SERVICE PO BOX 7346 PHILADELPHIA, PA 19101-7346

JILL ANDERSON. 5178 SUNTIDE PASS SAINT PAUL, MN 55129

MERCEDES-BENZ FINANCIAL SERVICES USA PO BOX 685 ROANOKE, TX 76262-0685

UNITED HEALTH CARE CUSTOMER SERVICE -PRIVACY UNIT PO BOX 740815 ATLANTA, GA 30374-0815

UNITED STATES TRUSTEE 300 S 4TH ST STE 1015 MINNEAPOLIS, MN 55415-2247

US BANK HOME MORTGAGE 2800 TAMARACK RD OWENSBORO, KY 42301

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ZEROREZ OF MI NNESOTA 5310 W 23RD ST STE 100 ST LOUIS PARK, MN 55416-1660